



Application for Employment

PART A

Clovis Community College is committed to the policy of providing Equal Employment Opportunity to all of its employees and applicants for employment regardless of race, color, national origin, sex, age, disability, sexual preference, spousal affiliation, veteran status, or religious affiliation. The College will endeavor to maintain the confidentiality of the information contained in this application to the extent permitted by Law.

Personal Data

Position Applying For _____

Date Available for Employment _____

Name (First, Middle, Last) _____

Social Security Number _____

List any former name(s) which may appear on educational and prior employment records:

Present Address (Street, City, State) _____

Permanent Address (if different) _____

Home Phone Business/Message Phone _____

Are you under the age of 18? ☐ Yes ☐ No

Do you have the ability to obtain a valid driver's license? (Answer only if operating a motor vehicle is a requirement of the job for which you are applying.) ☐ Yes ☐ No

Do you have the right to work in the United States without sponsorship? ☐ Yes ☐ No

Are you subject to any post-termination agreements with a Prior employer? If yes, please explain _____

Have you previously worked for Clovis Community College? ☐ Yes ☐ No

Department/Area:_____ Supervisor's Name:_____

Please list names of all relatives currently employed at Clovis Community College.

Work Experience

Give the names of the companies for which you have worked beginning with your present or last employer.

Name of employer: _____

Address _____

City/State, Zip _____ Phone Number _____

Job title and nature of work done: _____

Dates of employment: From:_____ To:_____ Rate of Pay: _____

Number of hours per week:_____ May we contact employer? _____

Reason for leaving or wanting to leave/additional comments: _____

Name of employer: _____

Address _____

City/State, Zip _____ Phone Number _____

Job title and nature of work done: _____

Dates of employment: From:_____ To:_____ Rate of Pay: _____

Number of hours per week:_____ May we contact employer? _____

Reason for leaving or wanting to leave/additional comments: _____

Name of employer: _____

Address _____

City/State, Zip _____ Phone Number _____

Job title and nature of work done: _____

Dates of employment: From:_____ To:_____ Rate of Pay: _____

Number of hours per week:_____ May we contact employer? _____

Reason for leaving or wanting to leave/additional comments: _____

Please explain any gaps in employment history:_____

References

Please provide the name and phone number of three work-related references.

Name	Phone Number
_____	_____
_____	_____
_____	_____

Education

Do you have a high school diploma? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have a bachelor's degree? <input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have a GED certificate? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have a master's degree? <input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have an associate degree? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have a doctorate? <input type="checkbox"/> Yes <input type="checkbox"/> No

Please list your field of study or major courses and the name of the institution where the degrees were obtained. _____

Special Skills

<input type="checkbox"/> Keyboarding	<input type="checkbox"/> Microsoft Office	<input type="checkbox"/> Mechanical	<input type="checkbox"/> Electricity
<input type="checkbox"/> Microsoft Word	<input type="checkbox"/> Cash Register	<input type="checkbox"/> Plumbing	<input type="checkbox"/> Carpentry
<input type="checkbox"/> Microsoft Excel	<input type="checkbox"/> Calculator	<input type="checkbox"/> Painting	<input type="checkbox"/> Custodial
<input type="checkbox"/> Microsoft Access	<input type="checkbox"/> Library	<input type="checkbox"/> Groundskeeping	
<input type="checkbox"/> Other _____			

Please list any other computer programs with which you are familiar _____

Additional Information

Please give any additional information that more fully describes your interests and qualifications. (Use additional sheets of paper if necessary.)

IMPORTANT: Faculty applicants should attach resume and cover letter. All transcripts and records from high schools, colleges, or universities received by Clovis Community College will become the property of the institution. No transcripts will be released. Applicants who desire copies of their transcripts should write directly to the institutions attended.

Federal and state agencies require public disclosure of specific institutional policies. The policies listed below are on file in the CCC library for public inspection:

Discrimination Policies and Grievance Procedures	Attendance, Costs, and Refund Policy
Privacy of Student Records	Graduation and Completion Rates
Campus Crime/ Campus Sex Offenses	Americans With Disabilities
	Drug-Free Workplace/Drug Free Campus

Reference Check Policy

In order to ensure the most qualified person possible is hired, the information furnished on this application form is considered to be only one step in the hiring process. Background and past performance inquiries may be conducted. The Criminal History Affidavit must be completed.



Position Applying For_____

Applicant's Certification

I hereby consent to having CCC contact anyone that it deems appropriate to review or verify any information I have given, or to discuss my background, past performance, or suitability for employment. I further waive all rights to bring any action for defamation, invasion of privacy, or any similar cause against anyone contacted as a result of this application investigative process. I certify that I am applying out of sincere interest in the position and for no other purpose. I certify that I can, with or without accommodation, satisfactorily perform the essential functions of this position.

This application is only valid for the position applied for as listed on page 1. I understand that my status as an applicant will end at the close of this job search. I understand that if the hiring department feels the applicant pool is inadequate, the search may be extended or suspended. I understand that I may apply for employment in the future by completing a new application for any vacant position. I understand that if an employee is terminated for cause, released under the probationary period, or resigned after disciplinary actions, the employee will not be eligible for future employment with Clovis Community College in any capacity. I certify that previous employment with CCC did not end under the circumstances mentioned above.

I certify that the information contained in this application is correct and complete to the best of my knowledge and belief. I understand that knowingly making a false statement or omission in this application may be sufficient cause for rejection of the application or dismissal after employment. Misrepresentation will negate all benefits.

Applicant's Name _____
(please print or type)

Applicant's Signature _____

Date _____

Please complete Part B of the application packet. This information will not affect your employment and will not be available for use in the selection process. It will be used by the Human Resource Services Office to compile statistics and will be kept confidential.



Dear Applicant:

Thank you for your interest in an employment opportunity at Clovis Community College. The College is a public employer and is required to comply with certain federal and state laws. According to the Inspection of Public Records (Section 14-2-1, New Mexico Statutes Annotated, 1978) every citizen of this state has the right to inspect any public records of the state. Therefore, your intent for employment with the College may become a matter of public record if outside inquiries and/or interview arrangements are made.

Clovis Community College has a Policy On Confidentiality For Personnel Recruitment which is available upon request.

To assure that the College remains a responsible state entity, and to protect your constitutional rights of privacy, the Human Resource Services Office must inform you, in writing, about this policy. This will give you the opportunity to determine if your application will be made a part of the public records file. As a part of your application, Clovis Community College asks you to review and check one of the items below and return this letter to:

**Human Resource Services Office
417 Schepps Blvd.
Clovis, NM 88101
(575) 769-4033**

- ☐ I hereby give Clovis Community College permission to release my records for public inspection should I be selected as a candidate for whom outside inquiries and/or interview arrangements are made.
- ☐ I do not give Clovis Community College permission to release my records for public inspection knowing that this will disqualify me from consideration.

Position Applying for _____

Applicant's Signature _____

Applicant's Name _____

(please type or print)

Date _____



Equal Employment Program

PART B

Voluntary Information Survey

Clovis Community College invites all applicants to submit information pertaining to any areas in which you might be considered a minority. The information is necessary in order to facilitate the college's equal employment efforts. Please return this form to the Clovis Community College Human Resource Services Office. It *should not*, however, be attached to your application.

Date: _____

Position Applying For: _____

Sex: _____ Male _____ Female

Ethnic Group: _____ Black _____ Hispanic _____ Asian
 _____ White _____ American Indian/Native Alaskan or Hawaiian

Veteran Status:

☐ Vietnam Era Veteran ☐ Disabled Vietnam Veteran ☐ Disabled Veteran

Disability Status:

A. Do you consider yourself, or are you considered by others to be disabled? _____ Yes _____ No

B. If yes, what is the nature of your disability? _____

C. Is there an accommodation that the college can make to assist you? _____

HOW DID YOU LEARN OF THIS VACANCY:

- ☐ Friend/Relative: _____
- ☐ Newspaper Ad, Name: _____
- ☐ Professional Journal, Name: _____
- ☐ College, Name: _____
- ☐ Internet: _____
- ☐ Other, Please describe: _____

DO NOT ATTACH TO YOUR APPLICATION.



Insert to Employment Application
CRIMINAL HISTORY AFFIDAVIT

Pursuant to New Mexico State Statutes, all applicants for employment are expected to provide us with this information. This insert is part of the application itself and any misrepresentation or omission of fact may be grounds for disqualification from further consideration or for termination of employment regardless of when the misrepresentation or omission is discovered.

I, _____, being an applicant for, or having been offered, a position with Clovis Community College, and being duly sworn according to law, certify that this document is a true, accurate, and full disclosure of my personal and professional background history. The conviction of a crime or any affirmative answer provided by you on this insert is NOT an automatic bar to employment. CCC will consider the nature of any conviction or alleged conduct underlying the affirmative response and the position for which you are applying.

Section I (Check one of the following two statements)

☐ I certify that I am not awaiting trial on, I have never been convicted of, and/or have never admitted committing, any of the offenses described in this document in this state or any similar offense or offenses in any other jurisdiction and that I have never been put on, and am not currently on, probation in this jurisdiction or any other jurisdiction.

OR

☐ I certify that the statements I attach to this form (see NOTE at bottom of Section II on reverse side of this sheet) give a true, accurate, and full account of any offenses described in this document that I may have committed or been charged with in this state or any other jurisdiction.

The crimes referred to in this document include, but are not limited to:

- | | | |
|-----------------------------------|---|---|
| 1. Sexual abuse of a minor | 13. Enticement of a child | 25. Abandonment or abuse of a child |
| 2. Sexual conduct with a minor | 14. Sexual assault | 26. Delivery to a minor of drug paraphernalia |
| 3. Sexual exploitation of a minor | 15. Kidnapping | 27. Contributing to the delinquency of a minor |
| 4. Criminal sexual conduct | 16. Arson | 28. Sale, delivery, display of sexual oriented material |
| 5. Voluntary manslaughter | 17. DUI/DWI | 29. Distribution of a controlled substance |
| 6. Burglary or Robbery | 18. Patronizing prostitutes | 30. Dangerous crime against a child or children |
| 7. Molestation of a child | 19. Prostitution | 31. Commercial sexual exploitation of a minor |
| 8. Embezzlement | 20. Promoting prostitution | 32. Trafficking controlled substances |
| 9. Fraud | 21. Murder | 33. Criminal sexual contact of a minor |
| 10. Criminal sexual penetration | 22. Indecent exposure | 34. Accepting earnings of a prostitute |
| 11. Drug possession | 23. Incest | 35. Aggravated assault of a minor |
| 12. Bomb Threat | 24. Misrepresentation of accounting records | |

Section II

- | | Yes | No |
|---|--------------------------|--------------------------|
| 1. Are you presently being investigated or under a procedure to consider your discharge for misconduct by your present employer? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Have you ever been reprimanded, disciplined, discharged, or asked to resign from a prior position for misconduct? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Have you ever resigned from a prior position without being asked, but under circumstances involving your employer's investigation of sexual contact with another person, of mishandling of funds, or of criminal conduct? | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Have you ever been convicted of a sex- or drug-related offense? | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Have you ever been charged with, or investigated for sexual abuse of another person? | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Have you ever been charged with, pled guilty or "no contest" (nolo contendere) to, or been convicted of any crime involving sexual abuse of any person or any other crime? | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Have you (a) ever been convicted of a crime, other than a minor traffic offense; or (b) ever entered a plea of guilty or a plea of "no contest", or has any court ever deferred further proceedings without entering a finding of guilty and placed you on probation or in a public service or education program for any crime other than a minor traffic offense? | <input type="checkbox"/> | <input type="checkbox"/> |

NOTE: If you have answered yes to any of the previous questions, please attach sheet(s) explaining in detail. Include the date of the charge, the court action, the offense in question, and the address of the court involved, and sign and date each sheet in the upper right corner.

Complete Reverse Side

I understand and agree that any offer of employment that I may receive, or have received, from CCC is conditioned by law upon the receipt of information pursuant to a check of my personal and professional history. I further understand and agree that I may be terminated by CCC if any information contained in this affidavit is inaccurate or if any information received by CCC is inconsistent with any statement made by me on this affidavit.

I authorize CCC to check my personal and employment history, including without limitation, evaluations, criminal arrest and conviction records, reference checks, and release of investigatory information possessed by any private or public employer of any state, local, or federal agency. I expressly waive in connection with any request for or provision of such information, any claims, including without limitation defamation, emotional distress, invasion of privacy or interference with contractual relations that I might otherwise have against CCC, its agents and officials or any provider of such information.

I understand that all terms of employment or offer of employment are conditional until the required background investigation is complete. I have read this authorization and release of all claims, and I expressly agree to the terms set forth herein.

Printed Name

Date

Signature

Social Security Number

Birthdate

State of _____

County of _____

Subscribed and sworn to before me this _____ day of _____.

My Commission Expires

Notary Public